

SECOND SUPPLEMENTAL APPLICATION DATA SHEET

APPLICATION INFORMATION

Application number:: 10/533,622
Filing Date:: October 30, 2003
Application Type:: Regular

Subject Matter:: Utility
Suggested classification::
Suggested Group Art Unit::
CD-ROM or CD-R?:: None
Number of CD disks::
Number of copies of CDs::
Sequence submission?::
Computer Readable Form (CRF)?::
Number of copies of CRF::
Title:: METHODS FOR TREATING AND
PREVENTING APOPTOSIS-RELATED
DISEASES USING RNA INTERFERING
AGENTS
Attorney Docket Number:: 033393-055194-US
Request for Early Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure:: 1
Total Drawing Sheets:: 3
Small Entity?:: Yes
Latin name::
Variety denomination name::
Petition included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent App.?:: No

APPLICANT INFORMATION

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full capacity

Given Name:: Judy

Middle Name::

Family Name:: Lieberman

Name Suffix::

City of Residence:: Brookline

State or Province of Residence::

MA

Country of Residence:: US

Street of mailing address:: 63 Buckminster Road

City of mailing address:: Brookline

State or Province of mailing

address:: MA

Country of mailing address:: US

Postal or Zip Code of mailing

address:: 02445

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full capacity

Given Name:: Manjunath

Middle Name::

Family Name:: Narasimhaswamy
Name Suffix::
City of Residence:: Roslindale
State or Province of Residence:: MA
Country of Residence:: US
Street of mailing address:: 46 Hilburn 28 Weld Street
City of mailing address:: Roslindale
State or Province of mailing address:: MA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 02131
Applicant Authority Type:: Inventor
Primary Citizenship Country:: US CN
Status:: Full capacity
Given Name:: Erwei
Middle Name::
Family Name:: Song
Name Suffix::
City of Residence:: Guangzhou
State or Province of Residence:: CN
Country of Residence:: CN
Street of mailing address:: 107 Yanjiang Wese Rd Room 502, No.8
Suihua El-Xiang, Jiangnan okada
Zhong
City of mailing address:: Guangzhou
State or Province of mailing address:: CN

Country of mailing address:: CN
Postal or Zip Code of mailing address:: 510120
Applicant Authority Type:: Inventor
Primary Citizenship Country:: US KR
Status:: Full capacity
Given Name:: Sang-Kyung
Middle Name::
Family Name:: Lee
Name Suffix::
City of Residence:: Seoul
State or Province of Residence:: Korea
Country of Residence:: Korea
Street of mailing address:: Asia Seonsuchon Apt 7-807, Jamsil
7-dong, Songpa-gu
City of mailing address:: Seoul
State or Province of mailing address:: Korea
Country of mailing address:: Korea
Postal or Zip Code of mailing address:: 138-797
Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full capacity
Given Name:: Nedim
Middle Name::
Family Name:: Ince
Name Suffix::
City of Residence:: Iowa City

State or Province of Residence:: IA
Country of Residence:: US
Street of mailing address:: 712 Wheaton Road
City of mailing address:: Iowa City
State or Province of mailing address:: IA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 52246
Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full capacity
Given Name:: Premlata
Middle Name::
Family Name:: Shankar
Name Suffix::
City of Residence:: Roslindale
State or Province of Residence:: MA
Country of Residence:: US
Street of mailing address:: ~~46 Hilburn 28 Weld Street~~
City of mailing address:: Roslindale
State or Province of mailing address:: MA
Country of mailing address:: US
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address::

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REPRESENTATIVE INFORMATION

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OR

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DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National	WO 2005/013886	10/30/2003

	Stage		
WO 2005/013886	The benefit of	60/422,578	10/30/2002

FOREIGN PRIORITY INFORMATION

Country::	Application number::	Filing Date::	Priority Claimed::

ASSIGNEE INFORMATION

Assignee name:: THE CENTER FOR BLOOD RESEARCH, INC.
Immune Disease Institute, Inc.

Street of mailing
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City of mailing
address:: Boston

State or Province of
mailing address:: MA

Country of mailing
address:: US

Postal or Zip Code of
mailing address:: 02115

Date: February 11, 2008 Respectfully submitted,

Customer No. 50828

/Leena H. Karttunen/
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